



Epidemiology of asthma mortality in Cuba and its relation to climate, 1989 to 2003

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Year: 2008
Journal: Medicc Review. 10 (3): 24-29

Abstract:

Introduction Asthma affects some 300 million people worldwide and causes over 250,000 deaths each year. It is considered a global health problem due to associated high morbidity and mortality rates; disability in inadequately treated patients; years of potential life lost (YPLL); social costs; and impact on the lives of patients, their families and society. Environmental factors, including climatic conditions, are triggers. The 2004 Cuban National Survey on Asthma found a national prevalence of 13% (CI 9.3-16.8). **Objective** Describe the relationship between climatic factors and asthma mortality in Cuba from 1989 to 2003. **Methods** Data on deaths from asthma in Cuba were obtained from medical death certificates. Crude and adjusted mortality rates were calculated using the 1981 Cuban population as the standard population; the two-parameter exponential smoothing method was used for trend and prediction analyses, with 95% confidence intervals (CI) for estimating mortality rates by age, sex and YPLL. ArcView software version 3.3 was used to obtain, adjust, and represent models of meteorological variables, and a bioclimatic atlas was included. **Results** Asthma mortality rates increased in Cuba in the early 90s and then decreased and stabilized in recent years; a rate of 2 per 100,000 population was predicted for 2008. For the period under study, 61% of asthma-related deaths occurred in Cuba's dry winter months (November-April). The meteorological variables related to risk of asthma mortality were: atmospheric pressure (997.7-1024.3 hPa), temperature (21.3-24.3°C), number of rainy days in the dry season (15.5-45.2 days), and cloudiness (2.99-5.51%). The provinces with the highest risk of asthma mortality were: Havana City, Havana, Ciego de Avila, and Camaguey. **Conclusions** In Cuba, unfavorable weather conditions in some geographic areas can cause the death of asthmatic patients, although these are not the only factors determining asthma mortality. The asthma mortality rate is not alarmingly high and is expected to remain stable. Nevertheless, preventive measures must be maintained, particularly for women, who suffer excess mortality from the disease. Implementation of prevention strategies that take into consideration the seasonal nature of asthma mortality is recommended.

Source: <http://www.medicc.org/mediccreview/index.php?issue=3&id=19&a=vahtml>
<http://www.ncbi.nlm.nih.gov/pubmed/21487366>

Resource Description

Exposure : ☒

weather or climate related pathway by which climate change affects health

Meteorological Factors, Precipitation, Temperature

Climate Change and Human Health Literature Portal

Geographic Feature:

resource focuses on specific type of geography

Ocean/Coastal

Geographic Location:

resource focuses on specific location

Non-United States

Non-United States: Non-U.S. North America

Health Impact:

specification of health effect or disease related to climate change exposure

Respiratory Effect

Respiratory Effect: Asthma

Mitigation/Adaptation:

mitigation or adaptation strategy is a focus of resource

Adaptation

Population of Concern: A focus of content

Population of Concern:

populations at particular risk or vulnerability to climate change impacts

Elderly

Other Vulnerable Population: Women

Resource Type:

format or standard characteristic of resource

Research Article

Timescale:

time period studied

Time Scale Unspecified

Vulnerability/Impact Assessment:

resource focus on process of identifying, quantifying, and prioritizing vulnerabilities in a system

A focus of content